

TITLE V BLOCK GRANT APPLICATION
FORMS (2-21)
STATE: MI
APPLICATION YEAR: 2010

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FORM 2
MCH BUDGET DETAILS FOR FY 2010

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: MI

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 19,711,600

A.Preventive and primary care for children:

\$ 8,446,122 (42.85%)

B.Children with special health care needs:

\$ 8,924,530 (45.28%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 479,100 (2.43%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 0

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 24,841,100

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 0

5. OTHER FUNDS (Item 15e of SF 424)

\$ 1,000,000

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 57,646,300

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 13,507,900

\$ 83,487,400

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 103,199,000

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 94,644

c. CISS: \$ 140,000

d. Abstinence Education: \$ 1,417,131

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 189,952,600

h. AIDS: \$ 1,212,495

i. CDC: \$ 1,719,623

j. Education: \$ 0

k. Other:

HRSA \$ 150,000

Preventive Block \$ 416,600

Title X \$ 7,133,200

Title XIX \$ 133,028,400

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 335,264,693

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 438,463,693

FORM NOTES FOR FORM 2

None

FIELD LEVEL NOTES

None

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: MI

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 21,273,900	\$ 19,804,006	\$ 21,217,300	\$ 19,077,070	\$ 19,783,800	\$ 19,101,965
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 1,000,988	\$ 0	\$ 199,503	\$ 0	\$ 276,757
3. State Funds <i>(Line3, Form 2)</i>	\$ 37,317,300	\$ 33,271,986	\$ 38,993,900	\$ 36,000,615	\$ 37,898,400	\$ 34,673,285
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 1,000,000	\$ 777,533	\$ 1,000,000	\$ 519,588	\$ 1,000,000	\$ 585,820
6. Program Income <i>(Line6, Form 2)</i>	\$ 53,381,500	\$ 54,143,513	\$ 56,540,400	\$ 54,367,852	\$ 56,566,500	\$ 54,213,278
7. Subtotal <i>(Line8, Form 2)</i>	\$ 112,972,700	\$ 108,998,026	\$ 117,751,600	\$ 110,164,628	\$ 115,248,700	\$ 108,851,105
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 218,071,300	\$ 205,882,737	\$ 243,360,869	\$ 204,190,998	\$ 233,691,768	\$ 239,343,383
9. Total <i>(Line11, Form 2)</i>	\$ 331,044,000	\$ 314,880,763	\$ 361,112,469	\$ 314,355,626	\$ 348,940,468	\$ 348,194,488
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: MI

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 19,275,700	\$ 18,798,370	\$ 19,686,900	\$	\$ 19,711,600	\$
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
3. State Funds <i>(Line3, Form 2)</i>	\$ 29,627,000	\$ 38,390,922	\$ 39,107,300	\$	\$ 24,841,100	\$
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
5. Other Funds <i>(Line5, Form 2)</i>	\$ 1,000,000	\$ 699,120	\$ 1,000,000	\$	\$ 1,000,000	\$
6. Program Income <i>(Line6, Form 2)</i>	\$ 50,605,500	\$ 59,631,837	\$ 57,488,700	\$	\$ 57,646,300	\$
7. Subtotal <i>(Line8, Form 2)</i>	\$ 100,508,200	\$ 117,520,249	\$ 117,282,900	\$ 0	\$ 103,199,000	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 243,304,440	\$ 245,523,815	\$ 266,261,699	\$	\$ 335,264,693	\$
9. Total <i>(Line11, Form 2)</i>	\$ 343,812,640	\$ 363,044,064	\$ 383,544,599	\$ 0	\$ 438,463,693	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Form3_Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2007
Field Note:
Variance due to Prior year Write-offs
2. **Section Number:** Form3_Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2008
Field Note:
Increase in CSHCS allocation
3. **Section Number:** Form3_Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2008
Field Note:
Trust Fund donations less than projected
4. **Section Number:** Form3_Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2007
Field Note:
Revenue less than anticipated
5. **Section Number:** Form3_Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2008
Field Note:
WIC Rebates higher than projected

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: MI

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Infants < 1 year old	\$ 53,381,500	\$ 54,143,513	\$ 56,540,400	\$ 54,367,852	\$ 56,566,500	\$ 54,213,278
c. Children 1 to 22 years old	\$ 9,145,900	\$ 8,711,884	\$ 8,754,800	\$ 8,682,151	\$ 8,699,800	\$ 8,636,965
d. Children with Special Healthcare Needs	\$ 40,864,700	\$ 37,830,947	\$ 43,157,400	\$ 39,368,551	\$ 40,897,900	\$ 39,016,204
e. Others	\$ 9,019,200	\$ 7,830,644	\$ 8,794,200	\$ 7,257,680	\$ 8,599,900	\$ 6,511,767
f. Administration	\$ 561,400	\$ 481,038	\$ 504,800	\$ 488,394	\$ 484,600	\$ 472,891
g. SUBTOTAL	\$ 112,972,700	\$ 108,998,026	\$ 117,751,600	\$ 110,164,628	\$ 115,248,700	\$ 108,851,105
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 800,000		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 0		\$ 100,000	
c. CISS	\$ 50,000		\$ 0		\$ 140,000	
d. Abstinence Education	\$ 1,447,500		\$ 1,417,132		\$ 1,417,131	
e. Healthy Start	\$ 627,300		\$ 0		\$ 0	
f. EMSC	\$ 391,000		\$ 0		\$ 0	
g. WIC	\$ 136,747,500		\$ 131,036,900		\$ 131,213,400	
h. AIDS	\$ 1,176,800		\$ 0		\$ 1,251,540	
i. CDC	\$ 1,844,100		\$ 1,892,204		\$ 1,992,897	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
HRSA	\$ 0		\$ 2,363,433		\$ 712,500	
Preventive Block	\$ 0		\$ 627,300		\$ 514,600	
Title X	\$ 7,133,200		\$ 7,133,200		\$ 7,133,200	
Title XIX	\$ 67,753,900		\$ 98,890,700		\$ 89,216,500	
III. SUBTOTAL	\$ 218,071,300		\$ 243,360,869		\$ 233,691,768	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: MI

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 0	\$ 0	\$ 0		\$ 0	
b. Infants < 1 year old	\$ 50,605,500	\$ 59,631,838	\$ 57,488,700		\$ 57,646,300	
c. Children 1 to 22 years old	\$ 8,453,700	\$ 8,490,246	\$ 8,453,700		\$ 8,453,700	
d. Children with Special Healthcare Needs	\$ 32,849,200	\$ 42,300,011	\$ 43,068,100		\$ 28,835,300	
e. Others	\$ 8,108,100	\$ 6,619,060	\$ 7,784,600		\$ 7,784,600	
f. Administration	\$ 491,700	\$ 479,094	\$ 487,800		\$ 479,100	
g. SUBTOTAL	\$ 100,508,200	\$ 117,520,249	\$ 117,282,900	\$ 0	\$ 103,199,000	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 94,644		\$ 94,644		\$ 94,644	
c. CISS	\$ 140,000		\$ 140,000		\$ 140,000	
d. Abstinence Education	\$ 0		\$ 0		\$ 1,417,131	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 141,836,900		\$ 154,791,400		\$ 189,952,600	
h. AIDS	\$ 1,212,495		\$ 1,212,495		\$ 1,212,495	
i. CDC	\$ 2,172,301		\$ 2,202,360		\$ 1,719,623	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
HRSA	\$ 150,000		\$ 150,000		\$ 150,000	
Preventive Block	\$ 416,600		\$ 416,600		\$ 416,600	
Title X	\$ 7,133,200		\$ 7,133,200		\$ 7,133,200	
Title XIX	\$ 90,148,300		\$ 100,121,000		\$ 133,028,400	
III. SUBTOTAL	\$ 243,304,440		\$ 266,261,699		\$ 335,264,693	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2008
Field Note:
WIC rebates were larger than expected
2. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2008
Field Note:
Reduction of other state fund sources
3. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2008
Field Note:
Reduction of state dollars
4. **Section Number:** Form4_I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2007
Field Note:
Reduction in State Funding

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: MI

TYPE OF SERVICE	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 56,829,800	\$ 53,416,198	\$ 58,792,500	\$ 54,483,648	\$ 56,533,000	\$ 53,285,123
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 50,666,300	\$ 50,671,519	\$ 53,546,200	\$ 50,536,050	\$ 53,351,900	\$ 50,333,826
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 4,915,200	\$ 4,429,271	\$ 4,908,100	\$ 4,656,536	\$ 4,879,200	\$ 4,759,265
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 561,400	\$ 481,038	\$ 504,800	\$ 488,394	\$ 484,600	\$ 472,891
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 112,972,700	\$ 108,998,026	\$ 117,751,600	\$ 110,164,628	\$ 115,248,700	\$ 108,851,105

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: MI

TYPE OF SERVICE	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 47,795,300	\$ 56,406,133	\$ 57,647,500	\$	\$ 43,414,700	\$
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 47,303,000	\$ 55,523,256	\$ 53,346,200	\$	\$ 53,346,200	\$
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 4,918,200	\$ 5,111,766	\$ 5,801,400	\$	\$ 5,959,000	\$
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 491,700	\$ 479,094	\$ 487,800	\$	\$ 479,100	\$
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 100,508,200	\$ 117,520,249	\$ 117,282,900	\$ 0	\$ 103,199,000	\$ 0

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

1.

Section Number: Form5_Main

Field Name: DirectHCExpended

Row Name: Direct Health Care Services

Column Name: Expended

Year: 2008

Field Note:

Reduction of State Funds
2.

Section Number: Form5_Main

Field Name: EnablingExpended

Row Name: Enabling Services

Column Name: Expended

Year: 2008

Field Note:

Actual WIC Rebates higher than projected

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: MI

Total Births by Occurrence: 120,240

Reporting Year: 2008

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	119,327	99.2	19	13	6	46.2
Congenital Hypothyroidism	119,327	99.2	559	70	70	100
Galactosemia	119,327	99.2	28	13	13	100
Sickle Cell Disease	119,327	99.2	71	46	46	100

Other Screening (Specify)

Biotinidase Deficiency	119,327	99.2	138	8	8	100
Cystic Fibrosis	119,327	99.2	463	39	39	100
21-Hydroxylase Deficient Congenital Adrenal Hyperplasia	119,327	99.2	728	3	3	100
Medium-Chain Acyl-CoA Dehydrogenase Deficiency	119,327	99.2	5	5	5	100

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
 (2) Report only those from resident births.
 (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1. Section Number: Form6_Main

Field Name: Phenylketonuria_Confirmed

Row Name: Phenylketonuria

Column Name: Confirmed Cases

Year: 2010

Field Note:

Out of 10 cases, 3 were classic, 2 were mild, 5 were hyperphe

2. Section Number: Form6_Main

Field Name: Galactosemia_Confirmed

Row Name: Galactosemia

Column Name: Confirmed Cases

Year: 2010

Field Note:

Of 8 cases, 2 were GG and 6 were DG

3. Section Number: Form6_Other Screening Types

Field Name: Other

Row Name: All Rows

Column Name: All Columns

Year: 2010

Field Note:

Michigan NBS panel comprises 49 disorders. However, we report here only few of them, the main reason being that the amino acid disorders, fatty acid oxidation disorders and organic acid disorders are usually grouped. Besides that these conditions are not very prevalent, we follow up all presumptive positive screens in each particular group and this current format doesn't allow us to report that.

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: MI

Reporting Year: 2008

	TITLE V	PRIMARY SOURCES OF COVERAGE				
Types of Individuals Served	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	24,940	100.0				
Infants < 1 year old	131,366	100.0				
Children 1 to 22 years old	2,264,212	100.0				
Children with Special Healthcare Needs	36,390	66.0	2.2	30.0	1.8	0.0
Others	276,771	100.0				
TOTAL	2,733,679					

FORM NOTES FOR FORM 7

2008 vital records data are not available for reporting.

FIELD LEVEL NOTES

None

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: MI

Reporting Year: 2007

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	124,063	93,185	21,855	581	3,522	524	1,343	3,053
Title V Served	124,063	93,185	21,855	581	3,522	524	1,343	3,053
Eligible for Title XIX	49,309	31,932	16,193	270	0	0	0	914
INFANTS								
Total Infants in State	125,172	93,225	21,848	583	3,508	523	1,337	4,148
Title V Served	125,172	93,225	21,848	583	3,508	523	1,337	4,148
Eligible for Title XIX	65,591	42,296	19,815	252	0	0	0	3,228

II. UNDUPLICATED COUNT BY ETHNICITY

HISPANIC OR LATINO (Sub-categories by country or area of origin)								
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	115,310	8,719	34	6,377	65	364	457	1,456
Title V Served	115,310	8,719	34	6,377	65	364	457	1,456
Eligible for Title XIX	49,309	2,237	0	0	0	0	0	2,237
INFANTS								
Total Infants in State	116,409	8,730	33	6,378	65	364	457	1,466
Title V Served	116,409	8,730	33	6,378	65	364	457	1,466
Eligible for Title XIX	65,594	3,558	0	0	0	0	0	3,558

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

None

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: MI

	FY 2010	FY 2009	FY 2008	FY 2007	FY 2006
1. State MCH Toll-Free "Hotline" Telephone Number	<u>800-262-4784</u>	<u>800-262-4784</u>	<u>800-262-4784</u>	<u>800-262-4784</u>	<u>800-262-4784</u>
2. State MCH Toll-Free "Hotline" Name	<u>800-26-birth</u>	<u>800-26-BIRTH</u>	<u>800-26-BIRTH</u>	<u>800-26-BIRTH</u>	<u>800-26-BIRTH</u>
3. Name of Contact Person for State MCH "Hotline"	<u>Alethia Carr</u>	<u>Brenda Fink</u>	<u>Brenda Fink</u>	<u>Gary M. Kirk, MD, MPH</u>	<u>Douglas Paterson</u>
4. Contact Person's Telephone Number	<u>517-335-8928</u>	<u>517-335-8863</u>	<u>517-335-8863</u>	<u>517-335-8928</u>	<u>517-335-8928</u>
5. Contact Person's Email	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
6. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>6,244</u>	<u>8,737</u>	<u>7,100</u>

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: MI

	FY 2010	FY 2009	FY 2008	FY 2007	FY 2006
1. State MCH Toll-Free "Hotline" Telephone Number	<u>1-800-359-3722</u>	<u>800-359-3722</u>	<u>800-359-3722</u>	<u>800-359-3722</u>	<u>800-359-3722</u>
2. State MCH Toll-Free "Hotline" Name	<u>Family Phone Line</u>	<u>Family Phone Line</u>	<u>Family Phone Line</u>	<u>Family Phone Line</u>	<u>Family Phone Line</u>
3. Name of Contact Person for State MCH "Hotline"	<u>Mary Marin</u>	<u>Mary Marin</u>	<u>Mary Marin</u>	<u>Mary Marin</u>	<u>Mary Marin</u>
4. Contact Person's Telephone Number	<u>517-241-7197</u>	<u>517-241-7197</u>	<u>517-241-7197</u>	<u>517-241-7197</u>	<u>517-241-7197</u>
5. Contact Person's Email	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
6. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>21,441</u>	<u>17,928</u>	<u>22,856</u>

FORM NOTES FOR FORM 9
None
FIELD LEVEL NOTES
None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2010
[SEC. 506(A)(1)]
STATE: MI

1. State MCH Administration:
(max 2500 characters)

Michigan's MCH program is administered by the Department of Community Health, Bureau of Family, Maternal and Child Health under the authority of the Public Health Code. The Bureau includes the Divisions of Family and Community Health, WIC and Children's Special Health Care Services. The Division of Family and Community Health has responsibility for family planning, prenatal care, adolescent health, childhood lead poisoning prevention, oral health, newborn hearing screening, infant mortality initiatives and child health. The WIC Division administers the USDA Supplemental Food Program for Women, Infants and Children, Project FRESH and breastfeeding initiatives. The CSHCS Division has responsibility for medical care and treatment for children with special health care needs, case management, and ancillary services.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 19,711,600
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 24,841,100
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 1,000,000
7. Program Income (Line 6, Form 2)	\$ 57,646,300
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 103,199,000

9. Most significant providers receiving MCH funds:

Local Health Departments
medical specialty providers
hospitals
community non-profit providers

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	24,940
b. Infants < 1 year old	131,366
c. Children 1 to 22 years old	2,264,212
d. CSHCN	36,390
e. Others	276,771

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

CSHCS Medical Care & Treatment includes a wide range of services such as physician care, hospitalization, pharmaceuticals, special therapies and durable medical equipment, home health nursing, and orthotics/prosthetics. Services are provided through an approved list of providers including physicians, clinics, hospitals and home health agencies.

b. Population-Based Services:
(max 2500 characters)

Newborn Screening: All newborns are screened for 50 disorders including hypothyroidism, sickle cell anemia, PKU, galactosemia, MSUD, MCAD, CAH and biotinidase deficiency. Components of the program include regional coordination and training in all maternity hospitals, centralized laboratory testing and follow-up, and contracted medical management. Hearing & Vision Screening: This program screens preschool and school-age children for hearing and vision problems. Local agencies are trained to conduct the testing and provide referral and follow-up, including to CSHCS otology clinics and community education.

c. Infrastructure Building Services:
(max 2500 characters)

The Pregnancy Risk Assessment Monitoring System is a study of risk factors among women related to birth outcomes. Data is gathered through interviews with new mothers by registered nurses trained in interview techniques. The information collected includes use of birth control and prenatal care, plans for breastfeeding, use of tobacco and alcohol during pregnancy, exposure to smoke, and access to and use of information on infant care such as the importance of sleep position. Most of the data obtained through the PRAMS study are not available from any other source.

12. The primary Title V Program contact person:

Name	Alethia Carr
Title	Director, Bureau of Family, Maternal & Child Health
Address	201 Townsend Street
City	Lansing
State	MI
Zip	48913

13. The children with special health care needs (CSHCN) contact person:

Name	Kathleen Stiffler
Title	Director, CSHCS Division
Address	320 South Walnut Street
City	Lansing
State	MI
Zip	48913

Phone 517-335-8922
Fax 517-335-9032
Email carra@michigan.gov
Web

Phone 517-335-5008
Fax 517-241-8970
Email stifflerk@michigan.gov
Web

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: MI

Form Level Notes for Form 11

We used the linked maternal mortality file to provide this information. The 2007 fetal deaths file is not available yet so we don't have that linked to deaths. Therefore, the number provided are considered still preliminary. The 2008 VS data are not available even for preliminary results.

PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	96.4
Numerator	183	208	189	203	190
Denominator	183	208	189	203	197
Data Source					NBS Program data

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	64	61.3	61.3	61.3	56.4
Annual Indicator	61.3	61.3	61.3	56.4	56.4
Numerator					
Denominator					
Data Source					NS-CSHCN 2005/06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	56.4	56.4	56.4	56.4	56.4
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2008

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

2. **Section Number:** Form11_Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

3. **Section Number:** Form11_Performance Measure #2

Field Name: PM02

Row Name:

Column Name:

Year: 2006

Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	58	55.8	55.8	55.8	46
Annual Indicator	55.8	55.8	55.8	46	46
Numerator					
Denominator					
Data Source					NS-CSHCN 2005/06
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	46	46	46	46	46
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes**1. Section Number:** Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

2. Section Number: Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

3. Section Number: Form11_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2006**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	50	66.5	66.5	66.5	60.8
Annual Indicator	66.5	66.5	66.5	60.8	60.8
Numerator					
Denominator					
Data Source					NS-CSHCN 2005/06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	60.8	60.8	60.8	60.8	60.8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2008

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

2. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

3. **Section Number:** Form11_Performance Measure #4

Field Name: PM04

Row Name:

Column Name:

Year: 2006

Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	<u>79</u>	<u>75.7</u>	<u>75.7</u>	<u>75.7</u>	<u>90.9</u>
Annual Indicator	<u>75.7</u>	<u>75.7</u>	<u>75.7</u>	<u>90.9</u>	<u>90.9</u>
Numerator	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
Denominator	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>
Data Source					NS-CSHCN 2005/06
<p>Check this box if you cannot report the numerator because</p> <p>1. There are fewer than 5 events over the last year, and</p> <p>2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.</p> <p>(Explain data in a year note. See Guidance, Appendix IX.)</p>					
Is the Data Provisional or Final?				Final	Final

	Annual Objective and Performance Data				
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>90.9</u>	<u>90.9</u>	<u>90.9</u>	<u>90.9</u>	<u>90.9</u>
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2008

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

2. **Section Number:** Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

3. **Section Number:** Form11_Performance Measure #5

Field Name: PM05

Row Name:

Column Name:

Year: 2006

Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	6	5.8	5.8	5.8	40.8
Annual Indicator	5.8	5.8	5.8	40.8	40.8
Numerator					
Denominator					
Data Source					NS-CSHCN 2005/06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	40.8	40.8	40.8	40.8	40.8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2008

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006.

2. **Section Number:** Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2007

Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

3. **Section Number:** Form11_Performance Measure #6

Field Name: PM06

Row Name:

Column Name:

Year: 2006

Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	87	89	91	91	91
Annual Indicator	81.2	82.7	81.2	81.8	82.0
Numerator	152,922	157,364	154,510	154,222	152,195
Denominator	188,328	190,283	190,283	188,535	185,604
Data Source					Nat'l Imm. Survey, MCIR
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	85	86	87	88	89
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

1. **Section Number:** Form11_Performance Measure #7

Field Name: PM07

Row Name:

Column Name:

Year: 2006

Field Note:

The 2006 National Immunization Survey data is not yet released. However, we have updated numbers for 2005.

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	18	17.8	17.6	17.4	17.4
Annual Indicator	18.7	17.6	17.0	14.0	16.8
Numerator	4,049	3,934	3,802	3,127	3,629
Denominator	216,657	222,960	223,398	223,398	216,619

Data Source

MI vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	17	17	16.9	16.9	16.8

Annual Indicator

Numerator

Denominator

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	41	33.6	25	25	30
Annual Indicator	33.4	22.5	23.4	23.4	31.3
Numerator	41,889	28,170	29,350	29,350	41,094
Denominator	125,417	125,417	125,417	125,417	131,500

Data Source

SEALS Data

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	35	40	45	50	55
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes1. **Section Number:** Form11_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data source for 2006 survey is the "Count Your Smiles" survey, a Basic Screening Survey conducted on a statistical sampling of 3rd grade children in Michigan

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	4.1	4.1	3.4	3.2	3
Annual Indicator	3.5	3.1	2.5	2.3	2.3
Numerator	73	65	50	47	44
Denominator	2,098,595	2,066,272	2,019,667	2,019,667	1,945,927
Data Source					MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	2.3	2.2	2.2	2.1	2.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. Section Number: Form11_Performance Measure #10

Field Name: PM10

Row Name:

Column Name:

Year: 2007

Field Note:

The population estimates for 2007 are not available.

PERFORMANCE MEASURE # 11

The percent of mothers who breastfeed their infants at 6 months of age.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective			35	40	20
Annual Indicator		14.6	15.8	15.8	15.3
Numerator		6,345	6,618	6,619	6,652
Denominator		43,459	41,890	41,890	43,476
Data Source					PNSS/PedNSS

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	20	20	22	23	25
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	100	100	100	100	100
Annual Indicator	90.9	95.4	96.7	97.1	96.7
Numerator	117,619	121,640	121,898	119,770	116,318
Denominator	129,387	127,518	126,015	123,407	120,240

Data Source

EHDI Database

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	100	100	100	100	100

Annual Indicator

Numerator

Denominator

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	6.7	5.6	3.7	3.5	4.5
Annual Indicator	5.8	3.7	5.0	4.7	5.9
Numerator	147,257	93,000	128,000	116,049	150,970
Denominator	2,538,920	2,513,514	2,554,000	2,445,601	2,579,250

Data Source

State Health Facts

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	6	6	5.9	5.9	5.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are
 not required for future year data.

Field Level Notes

1. Section Number: Form11_Performance Measure #13

Field Name: PM13

Row Name:

Column Name:

Year: 2006

Field Note:

Data from the US Census American Community Survey

PERFORMANCE MEASURE # 14

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective			16	15.8	29.5
Annual Indicator		16.1	16.2	29.5	30.1
Numerator		15,434	15,516	28,255	29,469
Denominator		95,863	95,780	95,780	97,905
Data Source					PNSS/PedNSS

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	29	28.5	28	27.5	27.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form11_Performance Measure #14

Field Name: PM14

Row Name:

Column Name:

Year: 2007

Field Note:

The change from 2006 to 2007 is primarily due to a correction in the data reported previously. Data for 2005 and 2006 reflected only those children with a BMI between the 85th and 95th percentile.

PERFORMANCE MEASURE # 15

Percentage of women who smoke in the last three months of pregnancy.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective			14.6	13.6	12.6
Annual Indicator		15.6	17.5	17.1	17.5
Numerator		19,851	22,281	21,371	21,120
Denominator		127,249	127,537	125,172	120,601
Data Source					PRAMS

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	16.8	16.7	16.7	16.6	16.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. Section Number: Form11_Performance Measure #15

Field Name: PM15

Row Name:

Column Name:

Year: 2006

Field Note:

We used 2005 PRAMS data to estimate the number of women who smoke in the third trimester in 2006.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	8.4	8.1	7.9	7.8	7.7
Annual Indicator	8.2	8.2	7.9	7.0	7.3
Numerator	60	61	59	52	54
Denominator	735,634	745,736	745,908	745,908	739,588
Data Source					MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	7.3	7.3	7.2	7.2	7.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	88	88.2	88.2	88.4	88.4
Annual Indicator	86.0	86.4	85.9	85.0	78.6
Numerator	1,848	1,849	1,796	1,826	1,716
Denominator	2,148	2,140	2,090	2,147	2,183
Data Source					MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	80	80	81	82	85
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	85.9	86.6	87.8	89	90.3
Annual Indicator	82.7	83.3	83.3	81.5	85.0
Numerator	107,283	106,238	106,188	102,050	102,050
Denominator	129,710	127,518	127,537	125,172	120,112

Data Source

MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	90.3	90.3	90.3	90.3	90.3

Annual Indicator

Numerator

Denominator

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 1

Percent of Medicaid-enrolled women who are screened for maternal depression

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			25	30	35
Annual Indicator			100.0		
Numerator			1		
Denominator			1		
Data Source					
Is the Data Provisional or Final?					

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	40	45	50	50	50
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2008
Field Note:
 Notes - 2009 No current data. Will have data next year after the algorithm has been corrected and we have one year of MIHP risk identifier information in system.
- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2007
Field Note:
 Due to technical problems with the reporting system, data will not be available until next year. All providers will be required to begin reporting screens as of July 1, 2008.
- Section Number:** Form11_State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2006
Field Note:
 No current data available. The Perinatal Depression workgroup expects to have data in 2008.

STATE PERFORMANCE MEASURE # 2

Percent of low birthweight births (<2500 grams) among live births.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	7.9	7.8	8.2	8.1	8
Annual Indicator	8.4	8.4	8.4	8.4	8.7
Numerator	10,867	10,665	10,720	10,550	10,543
Denominator	129,710	127,518	127,537	125,172	120,601
Data Source					MI Vital Records
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>7.9</u>	<u>7.8</u>	<u>7.8</u>	<u>7.7</u>	<u>7.6</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Form11_State Performance Measure #2

Field Name: SM2**Row Name:****Column Name:****Year:** 2006**Field Note:**

The annual performance objective has remained around the same since 2003, with minor variances. When Kids Count's Right Start data is looked at for 2003-05 births, it shows that the higher the percent of Medicaid births in a locale the higher the rate of LBWs. Locations with over 40 percent Medicaid births, the rate is 11.2; those areas with 20-40 percent, Medicaid the rate is 8.0; and for locales with less than 20 percent Medicaid births, the rate is 7.1

STATE PERFORMANCE MEASURE # 3

Percent of preterm births (<37 weeks gestation) among live births

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	11.1	11	11	10.9	10.2
Annual Indicator	10.0	10.0	9.6	10.0	10.9
Numerator	12,939	12,794	12,297	12,523	13,141
Denominator	129,710	127,518	127,537	125,172	120,601
Data Source					MI Vital Records
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	10.2	10.1	10.1	10	9.9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 4

Percent of live births resulting from unintended pregnancies.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	39.2	38.7	38.7	38.3	37.8
Annual Indicator	39.6	41.8	40.7	40.2	39.6
Numerator	51,402	53,330	51,909	50,284	47,770
Denominator	129,710	127,518	127,537	125,172	120,601
Data Source					PRAMS
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	37.3	37.3	37.3	37.3	37.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Form11_State Performance Measure #4

Field Name: SM4**Row Name:****Column Name:****Year:** 2006**Field Note:**

PRAMS data was used to estimate the number of unintended pregnancy in Michigan. A rate of 41.3 (as an estimated rate based on the previous years of PRAMS data) was applied to the 2006 preliminary total number of live births reported by the Vital Records office.

STATE PERFORMANCE MEASURE # 5

Increase the percent of Medicaid enrolled children, 0-6 years of age, who receive lead screening

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	25	60	70	80	30
Annual Indicator	24.3	27.1	28.9	29.2	28.6
Numerator	86,088	96,887	105,514	107,856	108,249
Denominator	354,928	357,527	364,858	369,615	377,921
Data Source					MDCH Data Warehouse
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>35</u>	<u>40</u>	<u>45</u>	<u>50</u>	<u>55</u>
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

None

STATE PERFORMANCE MEASURE # 6

Maternal mortality ratio in Black women

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	26.4	25.7	90	90	89
Annual Indicator	80.1	98.4	52.5	87.0	44.2
Numerator	18	22	12	19	10
Denominator	22,484	22,365	22,873	21,848	22,619
Data Source					MI Vital Records
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	88	86	84	82	82
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 7

Rate of breastfeeding at six months

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			35	40	20
Annual Indicator		14.6	15.8	15.8	15.3
Numerator		6,345	6,618	6,619	6,652
Denominator		43,459	41,890	41,890	43,476
Data Source					PNSS/PedNSS
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>25</u>	<u>30</u>	<u>35</u>	<u>40</u>	<u>25</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

STATE PERFORMANCE MEASURE # 8

Percent of WIC-enrolled children who are overweight (BMI greater than or equal to 95th Percentile)

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective			12.3	12.1	12
Annual Indicator		13.2	13.2	12.4	30.1
Numerator		29,252	29,252	27,982	29,469
Denominator		221,604	221,604	225,665	97,905
Data Source					PNSS/PedNSS
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	29	28.5	28	27.5	27.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

- Section Number:** Form11_State Performance Measure #8

Field Name: SM8**Row Name:****Column Name:****Year:** 2008**Field Note:**

The change from 2007 to 2008 is primarily due to a correction in the data reported previously. Data for prior years reflected all children in WIC, 0-5 years of age (denominator).

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)]
STATE: MI

Form Level Notes for Form 12

We don't have vital records preliminary data available for 2008 so we used 2007 data to report the preliminary performance for 2008. The 2007 fetal deaths file is not finalized and therefore we don't have data to report any fetal deaths. As a result, either the numerator or the denominator for the perinatal indicator does not include fetal deaths as required. The perinatal indicator is based only on the deaths below 7 days and thus considered preliminary for 2007 and 2008.

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	8	7.9	7.8	7.7	7.6
Annual Indicator	7.6	7.9	7.4	8.0	7.3
Numerator	984	1,013	940	997	880
Denominator	129,710	127,518	127,537	125,172	120,601

Data Source

MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	7.6	7.6	7.5	7.4	7.4
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

Field Level Notes

None

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	2.4	2.4	2.3	2.3	2.3
Annual Indicator	3.3	3.3	2.7	2.8	2.8
Numerator	17.3	17.9	14.8	16.5	14.6
Denominator	5.2	5.5	5.4	5.8	5.3
Data Source					MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	2.2	2.2	2.1	2.1	2.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

None

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	5.6	5.5	5.4	5.4	5.3
Annual Indicator	5.4	5.5	5.2	5.6	5.0
Numerator	694	700	660	697	597
Denominator	129,710	127,518	127,537	125,172	120,601
Data Source					MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	5.3	5.2	5	5	4.9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are
 not required for future year data.

Field Level Notes1. **Section Number:** Form12_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

The denominator is based on data from the new Electronic Birth Certificate system and appears to under-represent the actual number of births in the state for 2007.
 Corrected data for neonatal mortality is not yet available.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	2.5	2.5	2.4	2.4	2.3
Annual Indicator	2.2	2.5	2.2	2.4	2.3
Numerator	290	313	280	300	283
Denominator	129,710	127,518	127,537	125,172	120,601
Data Source					MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	2.3	2.2	2	2	1.9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are
 not required for future year data.

Field Level Notes1. **Section Number:** Form12_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2007**Field Note:**

The denominator is based on data from the new Electronic Birth Certificate system and appears to under-represent the actual number of births in the state for 2007.
 Corrected data for postneonatal mortality is not yet available.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	9.8	9.8	9.7	9.6	9.6
Annual Indicator	7.8	6.1	6.7	4.4	4.1
Numerator	1,015	778	854	553	493
Denominator	130,508	127,518	127,537	125,172	120,601
Data Source					MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	9	9	8	7	7
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2008

Field Note:

Provisional data includes only hebdomadal deaths.

2. **Section Number:** Form12_Outcome Measure 5

Field Name: OM05

Row Name:

Column Name:

Year: 2007

Field Note:

The denominator is based on data from the new Electronic Birth Certificate system and appears to under-represent the actual number of births in the state for 2007. Corrected data for perinatal mortality is not yet available.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	19.4	18.8	18.1	17.5	16.9
Annual Indicator	19.4	21.4	17.7	17.2	16.6
Numerator	380	414	335	326	301
Denominator	1,960,048	1,937,046	1,895,794	1,895,794	1,818,247
Data Source					MI Vital Records

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	16.5	16.5	16.5	16.2	16.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are
 not required for future year data.

Field Level Notes

None

STATE OUTCOME MEASURE # 1

Ratio of Native American infant mortality to the white infant mortality rate

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			1.7	1.7	1.6
Annual Indicator	1.7	1.7	1.8	1.8	1.7
Numerator	10	10	9	11	10
Denominator	6	6	5	6	6
Data Source					MI Vital Records
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	1.6	1.5	1.5	1.4	1.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Field Level Notes

1. **Section Number:** Form12_State Outcome Measure 1

Field Name: SO1

Row Name:

Column Name:

Year: 2008

Field Note:

The actual average rate for white infant mortality is 5.5 (denominator), resulting in a ratio of 1.8.

2. **Section Number:** Form12_State Outcome Measure 1

Field Name: SO1

Row Name:

Column Name:

Year: 2006

Field Note:

This is the ratio between the average IMR for American Indians and the average IMR for Whites for 2004-2006.

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: MI

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

2

Total Score: 17

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: MI FY: 2010

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Establish a system to better identify, screen and refer for maternal depression.
2. Increase the rate and duration of breastfeeding.
3. Reduce the percentage of unintended and teen pregnancies.
4. Reduce the percentage of preterm births and births with low birth weight.
5. Establish a medical home and increase care coordination for children with special health care needs.
6. Increase the number of CSHCS enrolled youth who have appropriate adult health care providers.
7. Reduce the proportion of children and adolescents who are obese.
8. Reduce the incidence of teen suicide.
9. Increase the testing rate of low-income children for lead poisoning.
10. Reduce the racial disparity between black and white infant mortality rate and between Native American and white infant mortality rate.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: MI

APPLICATION YEAR: 2010

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	Data-related Issues - Needs Assessment If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Assist with organization of and analysis of feedback from focus groups regarding the 2011 needs assessment	Need experience with obtaining information via the focus group format	Unknown at this time
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: MI

SP # 1

PERFORMANCE MEASURE:

Percent of Medicaid-enrolled women who are screened for maternal depression

STATUS:

Active

GOAL

To identify and treat women who experience postpartum depression

DEFINITION

The number of Medicaid-enrolled women who are screened for maternal depression divided by the number of Medicaid-enrolled women who give birth during the reporting year

Numerator:

Number of Medicaid-enrolled women screened for maternal depression

Denominator:

Number of Medicaid-enrolled women who gave birth during reporting year

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Medicaid database

SIGNIFICANCE

Postpartum depression occurs anytime during the first year after delivery with an estimated prevalence of almost 12%. Postpartum psychosis is the extremely severe form in which the mother loses touch with reality and has thoughts of suicide/homicide. PPD affects a woman's ability to function as a new mother and can impair the cognitive and language development of the newborn.

SP # 2

PERFORMANCE MEASURE:

Percent of low birthweight births (<2500 grams) among live births.

STATUS:

Active

GOAL

To reduce the number of live births with low birthweight

DEFINITION

Numerator:

Number of live births with birthweight less than 2500 grams

Denominator:

Number of live births

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics, MDCH PERCENT OF LIVE BIRTHS WITH LOW BIRTH WEIGHT (LESS THAN 2500 GRAMS) 1996 1997 1998 1999 2000 N % N % N % N % N % Total 10228 7.7 10335 7.8 10468 7.9 10703 8.0 10706 7.9 Non-Hispanic White 6384 6.4 6439 6.6 6424 6.5 6393 6.5 6385 6.4 Non-Hispanic Black 3270 13.6 3194 13.3 3336 13.9 3495 14.7 3508 14.6 American Indian 43 6.1 44 6.0 47 6.8 45 6.7 38 6.0 Asian/Pacific Islander 148 6.1 214 7.7 231 7.7 280 8.4 244 6.7 Hispanic 307 6.1 365 6.7 389 6.5 415 6.7 431 6.2

SIGNIFICANCE

Baseline: 7.9 percent of live births weight (less than 2,500 grams) in Michigan, 2000. The percent of live births with low birthweight for Non-Hispanic Black live birhs is twice that for Non-Hispanic White live births and all other racial groups.

SP # 3

PERFORMANCE MEASURE:

Percent of preterm births (<37 weeks gestation) among live births

STATUS:

Active

GOAL

To reduce the percentage of preterm births (less than 37 weeks of gestational age)

DEFINITION

Numerator:

Number of preterm infants with less than 37 weeks of gestational age

Denominator:

Number of live infants

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics Michigan Department of community Health PERCENT OF PRETERM INFANTS (LESS THAN 37 WEEKS OF GESTATIONAL AGE) 1996 1997 1998 1999 2000 N % N % N % N % N % Total 13778 10.3 14319 10.7 14646 11.0 14368 10.8 14833 10.9 Non-Hispanic White 8919 8.9 9277 9.3 9561 9.6 9326 9.5 9579 9.6 Non-Hispanic Black 3985 16.6 4019 16.6 4033 16.7 3985 16.8 4023 16.8 American Indian 77 9.9 85 11.7 84 12.1 68 10.1 72 11.4 Asian/Pacific Islander 219 9.1 264 9.5 299 10.0 297 8.9 342 9.4 Hispanic 505 10.0 597 11.0 636 10.7 627 10.1 722 10.4

SIGNIFICANCE

Baseline: 10.9 percent of pre-term births among all live births in Michigan 2000. The current percent of preterm births is about 45% higher than the Healthy People 2010 objective. The percent of pre-term infants for Non-Hispanic Black is 1.7 times that for Non-Hispanic White, and much higher than other racial groups.

SP # 4

PERFORMANCE MEASURE:

Percent of live births resulting from unintended pregnancies.

STATUS:

Active

GOAL

To reduce the percent of live births resulting from unintended pregnancies

DEFINITION

Number of live births resulting from unintended pregnancies divided by total number of live births multiplied by 100.

Numerator:

Number of live births which result from unintended pregnancies

Denominator:

Number of live births

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Pregnancy Risk Assessment Monitoring System (PRAMS) Michigan Department of Community Health PERCENT OF LIVE BIRTHS RESULTED FROM UNINTENDED PREGNANCIES 1996 1997 1998 1999 2000 Unintended pregnancies 43.1% 43.2% 41.8% 39.8% 40.2% RACE Black 71.0% 69.0% 68.2% 67.9% 64.0% Non-Black 37.0% 38.4% 37.0% 35.0% 35.8% AGE < 20 84.3% 81.3% 73.7% 86.1% 70.7% 20 - 29 42.6% 44.9% 46.0% 41.0% 42.2% 30 + 28.1% 27.2% 22.6% 24.8% 27.1%

SIGNIFICANCE

Baseline:40.2 percent of live births resulting from unintended pregnancies in Michigan, 2000. Significant disparities between racial and age groups.

SP # 5

PERFORMANCE MEASURE:

Increase the percent of Medicaid enrolled children, 0-6 years of age, who receive lead screening

STATUS:

Active

GOAL

To increase the percent of Medicaid enrolled children 0-6 years of age who receive lead screening

DEFINITION

Numerator:

Number of Medicaid enrolled children 0-6 years of age who receive lead screening

Denominator:

Total number of Medicaid enrolled children 0-6 years of age

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division of Family and Community Health Michigan Department of Community Health

SIGNIFICANCE

In 2001, there were 52,946 (17.9%) among 296,312 Medicaid enrolled children 0 to 5 years of age received lead screening.

SP # 6

PERFORMANCE MEASURE:

Maternal mortality ratio in Black women

STATUS:

Active

GOAL

To reduce the maternal mortality ratio in Black women

DEFINITION

Numerator:

Number of deaths to Black women while pregnant or within 42 days of termination from a cause related or aggravated by the pregnancy or its management, but not from accidental or incidental causes.

Denominator:

Number of live births to Black women

Units: 100000 **Text:** ratio

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics, MDCH MATERNAL MORTALITY RATIO (100,000 LIVE BIRTHS) 1996 1997 1998 1999 2000 Mortality ratio 3.9 9.3 6.2 8.2 6.6 (1/100,000) Number by race White* 2 6 2 8 5 Black* 3 6 5 3 4

SIGNIFICANCE

Baseline: 6.6 maternal deaths per 100,000 live births in Michigan, 2000. A significant racial disparity exist with maternal deaths. The number of maternal deaths in Black women contributed a big portion of the overall maternal mortality ratio in Michigan.

SP # 7

PERFORMANCE MEASURE:

Rate of breastfeeding at six months

STATUS:

Active

GOAL

The increase the duration of breastfeeding to at least six months

DEFINITION

Numerator:

The number of mothers in the WIC program who continue to breastfeed their infants at six months of age.

Denominator:

The number of mothers enrolled in WIC

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-19b

Increase the proportion of mothers who breastfeed their babies at 6 months

DATA SOURCES AND DATA ISSUES

WIC data

SIGNIFICANCE

The advantages of breastfeeding are indisputable and include nutritional, immunological and psychological benefits to both infant and mother

SP # 8

PERFORMANCE MEASURE:

Percent of WIC-enrolled children who are overweight (BMI greater than or equal to 95th Percentile)

STATUS:

Active

GOAL

Reduce the percent of WIC-enrolled children who are overweight

DEFINITION

Percent of WIC-enrolled children with a Body Mass Index (BMI) greater than or equal to the 95th percentile

Numerator:

Number of infants and children enrolled in WIC who are overweight (\geq 95th percentile)

Denominator:

Number of infants and children enrolled in WIC

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

19-3

Reduce the proportion of children and adolescents who are overweight or obese

DATA SOURCES AND DATA ISSUES

WIC program data WIC is the only source of routine data on the weight status of children; no population-based data is available

SIGNIFICANCE

Official statewide data for younger Michigan children are not available but, in the samples collected in recent years and in high school students studied in the Youth Risk Behavior Survey, Michigan children are similar to children across the nation.

SO # 1

OUTCOME MEASURE:

Ratio of Native American infant mortality to the white infant mortality rate

STATUS:

Active

GOAL

To reduce the disparity between the Native American infant mortality rate and the white infant mortality rate

DEFINITION

Numerator:

average rate of Native American infant mortality for three previous years

Denominator:

average rate of white infant mortality for three previous years

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

HP Objective 16-1 Reduce fetal and infant deaths

DATA SOURCES AND DATA ISSUES

Division of Vital Records and Health Statistics, matched birth and death files

SIGNIFICANCE

The gap between Native American and white infant mortality has increased from 37% in 1999 to 90% in 2003

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: MI

Form Level Notes for Form 17

--These are the number of hospitalizations not the number of persons hospitalized. --Numerator Source: 2007 MIDB, MDCH. 2008 data is not yet available. --Denominator Source: 2007 Population Estimates, Division for Vital Records and Health Statistics, MDCH --Asthma hospitalization defined by primary discharge diagnosis, ICD-9-CM = 493.xx -- Calculated rate is not age-adjusted.

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	2004	2005	Annual Indicator Data		2008
	2006	2007			
Annual Indicator	49.9	46.5	40.1	38.1	38.1
Numerator	3,243	3,021	2,560	2,414	2,414
Denominator	649,842	650,215	638,195	633,017	633,017

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer
 than 5 and therefore a 3-year moving average cannot be
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #01

Field Name: HSC01

Row Name:

Column Name:

Year: 2006

Field Note:

There is no data available yet for 2006.

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>79.7</u>	<u>85.1</u>	<u>86.2</u>	<u>86.4</u>	<u>86.1</u>
Numerator	<u>49,578</u>	<u>56,516</u>	<u>58,927</u>	<u>59,916</u>	<u>59,561</u>
Denominator	<u>62,203</u>	<u>66,402</u>	<u>68,352</u>	<u>69,357</u>	<u>69,152</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

None

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	2004	2005	<u>Annual Indicator Data</u>		
			2006	2007	2008
Annual Indicator	<u>79.2</u>	<u>55.5</u>	<u>64.5</u>	<u>69.4</u>	<u>74.9</u>
Numerator	<u>486</u>	<u>201</u>	<u>216</u>	<u>238</u>	<u>236</u>
Denominator	<u>614</u>	<u>362</u>	<u>335</u>	<u>343</u>	<u>315</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

None

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>75.2</u>	<u>76.6</u>	<u>75.9</u>	<u>73.9</u>	<u>73.9</u>
Numerator	<u>97,227</u>	<u>97,437</u>	<u>96,851</u>	<u>92,503</u>	<u>92,503</u>
Denominator	<u>129,311</u>	<u>127,122</u>	<u>127,537</u>	<u>125,172</u>	<u>125,172</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form17_Health Systems Capacity Indicator #04

Field Name: HSC04

Row Name:

Column Name:

Year: 2007

Field Note:

The denominator is based on data from the new Electronic Birth Certificate system and appears to under-represent the actual number of births in the state for 2007. Corrected data is not yet available.

HEALTH SYSTEMS CAPACITY MEASURE # 07A

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	2004	2005	<u>Annual Indicator Data</u>		
			2006	2007	2008
Annual Indicator	<u>80.2</u>	<u>83.6</u>	<u>84.3</u>	<u>85.4</u>	<u>86.2</u>
Numerator	<u>792,549</u>	<u>835,005</u>	<u>924,469</u>	<u>893,739</u>	<u>923,503</u>
Denominator	<u>988,147</u>	<u>998,680</u>	<u>1,097,269</u>	<u>1,046,771</u>	<u>1,071,516</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

None

HEALTH SYSTEMS CAPACITY MEASURE # 07B

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>44.5</u>	<u>45.7</u>	<u>45.9</u>	<u>48.2</u>	<u>49.2</u>
Numerator	<u>84,595</u>	<u>93,697</u>	<u>97,602</u>	<u>105,000</u>	<u>109,212</u>
Denominator	<u>190,029</u>	<u>205,246</u>	<u>212,662</u>	<u>218,064</u>	<u>221,780</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

Field Level Notes

None

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

		Annual Indicator Data				
	2004	2005	2006	2007	2008	
Annual Indicator	24.3	24.2	23.8	19.7	17.5	
Numerator	7,613	7,568	7,689	6,406	5,713	
Denominator	31,336	31,336	32,303	32,449	32,629	
Check this box if you cannot report the numerator because						
1. There are fewer than 5 events over the last year, and						
2. The average number of events over the last 3 years is fewer						
than 5 and therefore a 3-year moving average cannot be						
applied.						
(Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?				Final	Final	

Field Level Notes

None

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: MI

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (< 2,500 grams)</i>	2008	Payment source from birth certificate	<u>10.1</u>	<u>7.6</u>	<u>8.7</u>
b) <i>Infant deaths per 1,000 live births</i>	2007	Payment source from birth certificate	<u>9.3</u>	<u>6.6</u>	<u>8</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2007	Payment source from birth certificate	<u>77.2</u>	<u>85.4</u>	<u>81.5</u>
d) <i>Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2007	Payment source from birth certificate	<u>70.9</u>	<u>76.7</u>	<u>73.9</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)
STATE: MI

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2008	185
b) <i>Medicaid Children</i> (Age range <u> </u> 1 to <u> </u> 19) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2008	150
c) <i>Pregnant Women</i>	2008	185

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)
STATE: MI

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2008	200
b) <i>Medicaid Children</i> (Age range <u> </u> 1 to <u> </u> 19) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2008	200
c) <i>Pregnant Women</i>	2008	200

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

None

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: MI

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	3	Yes
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	No
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
 1 = No, the MCH agency does not have this ability.
 2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
 3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: MI

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	No
Other:		

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

None

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: MI

Form Level Notes for Form 11

2007 hospital discharge data have been used to report this performance. Please note that these are discharges and not individuals. We don't have 2008 data so 2007 data have been used to provide preliminary info for that year.

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2004	2005	2006	2007	2008
Annual Indicator	8.4	8.4	8.4	8.4	8.7
Numerator	10,867	10,665	10,720	10,550	10,485
Denominator	129,710	127,518	127,537	125,172	120,601

Check this box if you cannot report the numerator because
 1. There are fewer than 5 events over the last year, and
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #01A

Field Name: HSI01A

Row Name:

Column Name:

Year: 2007

Field Note:

The denominator is based on data from the new Electronic Birth Certificate system and appears to under-represent the actual number of births in the state for 2007. Corrected data is not yet available.

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

		Annual Indicator Data				
		2004	2005	2006	2007	2008
Annual Indicator		<u>6.4</u>	<u>6.5</u>	<u>6.5</u>	<u>6.3</u>	<u>6.9</u>
Numerator		<u>7,985</u>	<u>7,941</u>	<u>7,987</u>	<u>7,905</u>	<u>7,987</u>
Denominator		<u>124,911</u>	<u>122,970</u>	<u>122,796</u>	<u>125,172</u>	<u>116,280</u>
Check this box if you cannot report the numerator because						
1. There are fewer than 5 events over the last year, and						
2. The average number of events over the last 3 years is fewer						
than 5 and therefore a 3-year moving average cannot be						
applied.						
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>						
Is the Data Provisional or Final?					Final	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #01B

Field Name: HSI01B

Row Name:

Column Name:

Year: 2007

Field Note:

The denominator is based on data from the new Electronic Birth Certificate system and appears to under-represent the actual number of births in the state for 2007. Corrected data is not yet available.

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	1.7	1.7	1.6	1.7	1.8
Numerator	2,148	2,140	2,090	2,147	2,183
Denominator	129,710	127,518	127,537	125,172	120,601
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #02A

Field Name: HSI02A

Row Name:

Column Name:

Year: 2007

Field Note:

The denominator is based on data from the new Electronic Birth Certificate system and appears to under-represent the actual number of births in the state for 2007. Corrected data is not yet available.

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

		Annual Indicator Data				
	2004	2005	2006	2007	2008	
Annual Indicator	1.2	1.2	1.2	1.2	1.4	
Numerator	1,482	1,521	1,508	1,550	1,678	
Denominator	124,911	122,970	122,796	125,172	116,280	
Check this box if you cannot report the numerator because						
1. There are fewer than 5 events over the last year, and						
2.The average number of events over the last 3 years is fewer						
than 5 and therefore a 3-year moving average cannot be						
applied.						
(Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?				Final	Provisional	

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #02B

Field Name: HSI02B

Row Name:

Column Name:

Year: 2007

Field Note:

The denominator is based on data from the new Electronic Birth Certificate system and appears to under-represent the actual number of births in the state for 2007. Corrected data is not yet available.

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	9.1	9.3	8.8	9.1	9.5
Numerator	191	192	178	184	184
Denominator	2,088,878	2,066,272	2,019,667	2,019,667	1,945,927
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03A

Field Name: HSI03A

Row Name:

Column Name:

Year: 2007

Field Note:

We don't have population estimates for 2007 so 2006 data were used for denominator.

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>3.5</u>	<u>3.1</u>	<u>2.5</u>	<u>2.6</u>	<u>2.3</u>
Numerator	<u>73</u>	<u>65</u>	<u>50</u>	<u>52</u>	<u>44</u>
Denominator	<u>2,088,878</u>	<u>2,066,272</u>	<u>2,019,667</u>	<u>2,019,667</u>	<u>1,945,927</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03B

Field Name: HSI03B

Row Name:

Column Name:

Year: 2007

Field Note:

We don't have population estimates for 2007 so 2006 data were used for denominator.

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>21.9</u>	<u>17.5</u>	<u>17.1</u>	<u>19.1</u>	<u>19.5</u>
Numerator	<u>316</u>	<u>254</u>	<u>247</u>	<u>276</u>	<u>276</u>
Denominator	<u>1,441,132</u>	<u>1,447,779</u>	<u>1,441,512</u>	<u>1,441,512</u>	<u>1,418,751</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #03C

Field Name: HSI03C

Row Name:

Column Name:

Year: 2007

Field Note:

We don't have population estimates for 2007 so 2006 data were used as denominator.

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	<u>210.9</u>	<u>209.7</u>	<u>196.4</u>	<u>269.4</u>	<u>279.6</u>
Numerator	<u>4,405</u>	<u>4,341</u>	<u>3,966</u>	<u>5,440</u>	<u>5,440</u>
Denominator	<u>2,088,878</u>	<u>2,069,997</u>	<u>2,019,667</u>	<u>2,019,667</u>	<u>1,945,927</u>

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer
than 5 and therefore a 3-year moving average cannot be
applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04A

Field Name: HSI04A

Row Name:

Column Name:

Year: 2007

Field Note:

We don't have either hospital discharge data or population estimates for 2007. We used 2006 population data as denominator and calculated the numerator for an annual indicator of 210 based on the prior years.

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	27.1	25.2	12.1	18.8	18.8
Numerator	566	522	245	379	379
Denominator	2,088,878	2,069,997	2,019,667	2,019,667	2,019,667

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04B

Field Name: HSI04B

Row Name:

Column Name:

Year: 2007

Field Note:

We don't have hospital discharge data nor the population estimates for 2007. Therefore we decided to just use as preliminary info the 2006 data as the trends are not linear and thus any estimates may not be accurate. Furthermore, the annual indicator for 2006 is more than 50% lower compared to 2005.

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2004	2005	Annual Indicator Data		2008
			2006	2007	
Annual Indicator	129.7	112.0	92.7	117.4	117.4
Numerator	1,872	1,622	1,337	1,693	1,693
Denominator	1,443,173	1,447,759	1,441,512	1,441,512	1,441,512

Check this box if you cannot report the numerator because
1. There are fewer than 5 events over the last year, and
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

Field Level Notes

1. **Section Number:** Form20_Health Status Indicator #04C

Field Name: HSI04C

Row Name:

Column Name:

Year: 2007

Field Note:

We don't have hospital discharge data nor population estimates for 2007. The annual indicator for 2006 is lower compared to 2005 and the trend is not linear. Therefore, we decided to use 2006 data as very preliminary for 2007.

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

		Annual Indicator Data			
	2004	2005	2006	2007	2008
Annual Indicator	<u>33.4</u>	<u>34.6</u>	<u>33.8</u>	<u>45.8</u>	<u>44.6</u>
Numerator	<u>11,984</u>	<u>12,403</u>	<u>12,305</u>	<u>16,769</u>	<u>16,122</u>
Denominator	<u>358,671</u>	<u>358,671</u>	<u>363,674</u>	<u>366,257</u>	<u>361,443</u>
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

Field Level Notes

None

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

		Annual Indicator Data			
	2004	2005	2006	2007	2008
Annual Indicator	<u>11.2</u>	<u>9.6</u>	<u>9.1</u>	<u>13.6</u>	<u>11.0</u>
Numerator	<u>19,570</u>	<u>16,831</u>	<u>15,681</u>	<u>23,095</u>	<u>17,970</u>
Denominator	<u>1,754,267</u>	<u>1,754,267</u>	<u>1,730,557</u>	<u>1,696,896</u>	<u>1,640,831</u>
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
Is the Data Provisional or Final?				Final	Final

Field Level Notes

None

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	127,680	94,225	23,546	996	3,643	71	5,199	0
Children 1 through 4	497,846	378,474	83,654	3,433	14,854	418	17,013	0
Children 5 through 9	641,124	492,969	104,904	4,069	17,812	478	20,892	0
Children 10 through 14	679,277	519,669	117,631	4,754	16,491	304	20,428	0
Children 15 through 19	739,588	566,862	135,831	5,408	14,852	292	16,343	0
Children 20 through 24	679,163	541,472	103,835	5,330	15,524	276	12,726	0
Children 0 through 24	3,364,678	2,593,671	569,401	23,990	83,176	1,839	92,601	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	118,048	9,632	0
Children 1 through 4	459,363	38,483	0
Children 5 through 9	597,315	43,809	0
Children 10 through 14	640,269	39,008	0
Children 15 through 19	703,808	35,780	0
Children 20 through 24	646,343	32,820	0
Children 0 through 24	3,165,146	199,532	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? Yes Is this data final or provisional? Provisional

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	144	35	95	1	2	0	1	10
Women 15 through 17	3,629	1,774	1,597	21	16	1	129	91
Women 18 through 19	8,319	4,938	2,859	60	52	2	263	145
Women 20 through 34	92,568	70,508	15,354	392	3,095	32	1,624	1,563
Women 35 or older	15,935	12,462	2,148	57	793	6	220	249
Women of all ages	120,595	89,717	22,053	531	3,958	41	2,237	2,058

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	125	19	0
Women 15 through 17	3,139	477	13
Women 18 through 19	7,507	764	48
Women 20 through 34	85,665	6,448	455
Women 35 or older	14,931	945	59
Women of all ages	111,367	8,653	575

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2008 Is this data from a State Projection? Yes Is this data final or provisional? Provisional

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	880	483	332	6	15	2	0	42
Children 1 through 4	125	77	41	2	1	0	0	4
Children 5 through 9	62	48	10	1	1	0	0	2
Children 10 through 14	114	67	43	0	2	0	0	2
Children 15 through 19	384	244	124	7	3	0	0	6
Children 20 through 24	574	380	176	4	5	0	0	9
Children 0 through 24	2,139	1,299	726	20	27	2	0	65

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	798	74	8
Children 1 through 4	119	6	0
Children 5 through 9	56	5	1
Children 10 through 14	107	7	0
Children 15 through 19	369	15	0
Children 20 through 24	560	14	0
Children 0 through 24	2,009	121	9

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	2,685,515	2,052,199	465,566	18,660	67,652	1,563	79,875	0	2008
Percent in household headed by single parent	16.6	13.2	37.4	24.7	9.2	17.2	25.2	28.2	2007
Percent in TANF (Grant) families	5.5	2.2	19.5	3.0	0.0	0.0	0.0	6.1	2008
Number enrolled in Medicaid	1,081,824	615,391	360,557	5,991	0	0	0	99,885	2008
Number enrolled in SCHIP	50,476	37,611	5,697	613	0	0	0	6,555	2008
Number living in foster home care	18,396	9,260	8,771	218	36	33	0	78	2008
Number enrolled in food stamp program	566,391	283,724	239,311	2,815	0	0	0	40,541	2008
Number enrolled in WIC	237,338	125,298	62,781	787	3,649	0	11,739	33,084	2008
Rate (per 100,000) of juvenile crime arrests	1,212.4	981.0	2,479.5	496.2	258.7	0.0	0.0	858.2	2007
Percentage of high school drop-outs (grade 9 through 12)	15.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2007

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	2,518,776	166,739	0	2008
Percent in household headed by single parent	73.1	26.9	0.0	2007
Percent in TANF (Grant) families	94.7	5.3	0.0	2008
Number enrolled in Medicaid	1,011,463	70,361	0	2008
Number enrolled in SCHIP	49,121	1,355	0	2008
Number living in foster home care	17,193	991	212	2008
Number enrolled in food stamp program	531,394	34,700	297	2008
Number enrolled in WIC	204,254	33,084	0	2008
Rate (per 100,000) of juvenile crime arrests	1,261.7	504.3	0.0	2007
Percentage of high school drop-outs (grade 9 through 12)	0.0	0.0	15.1	2007

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2008 Is this data from a State Projection? No Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	2,228,977
Living in urban areas	1,987,281
Living in rural areas	698,234
Living in frontier areas	0
Total - all children 0 through 19	2,685,515

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2007 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Total Population	10,003,422.0
Percent Below: 50% of poverty	4.5
100% of poverty	10.9
200% of poverty	28.3

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2007 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	2,685,515.0
Percent Below: 50% of poverty	6.6
100% of poverty	15.9
200% of poverty	37.3

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

1. **Section Number:** Form21_Indicator 09A

Field Name: HSI Race_DropOutPercent

Row Name: Percentage of high school drop-outs (grade 9 through 12)

Column Name:

Year: 2010

Field Note:

For the first time, the graduation rate is based on a four-year cohort graduation rate, in compliance with the No Child Left Behind (NCLB) Act of 2001.